

Outdoor Motorized Recreation Trail Aids Application

For: (Choose all that apply)

Form 8700-159 (01/14) Page 1 of 5

- ☐ All-Terrain Vehicle Trail Aids
☒ County Snowmobile Trail Aids

- ☐ Motorized Stewardship
(20% match required)

Notice: Completion of this form is required under s. 23.09(26) and 23.33, Wis. Stats. Failure to complete this form will result in denial of financial assistance. Personally identifiable information found on this form is not intended to be used for any other purpose. The Department may provide this information to requesters as required by Wisconsin's Open Records law [ss. 19.31 - 19.39, Wis. Stats.].

Instructions: Applications may combine more than one source of funds. They may be submitted for consideration of both traditional ATV, Snowmobile funding AND Motorized Stewardship funding. Submit two (2) copies of all forms and attachments. See page 2 for necessary attachments. Mail applications to your Community Services Specialist.

Activities Involved in Application: (Select all that apply)

- ☐ Maintenance ☐ Insurance ☒ Bridge Rehabilitation
☐ Acquisition ☐ Development ☒ Trail Rehabilitation

Leave Blank - DNR Use Only

Project Number

Applicant Information

Applicant/Organization Name

Clark County Forestry and Parks

Check Recipient: Individual other than authorized individual to act on behalf of the applicant. Provide check recipient information below:

Authorized Individual Name, Title

Sean O'Donnell, Parks and Programs Manager

Check Recipient Name: (Name to Appear on Check)

Address

517 Court St, room 103

Address

City, State, ZIP Code

Neillsville, WI, 54456

City, State, ZIP Code

Telephone Number

(715) 743-5139

E-Mail Address

Project Information

Project Title

Thorp "N" Trail Mandatory Trail Relocation

Number of Trail Miles

8

Project Description

- For maintenance, include a concise statement of the type of maintenance activities and the type of grooming equipment used.
- For major bridge rehabilitation, describe the proposed construction items to rehabilitate the bridge.
- For trail rehabilitation, describe the repair and renovation activities necessary to improve the trail for user safety.
- For development, describe development activities and structures to be constructed.
- For development of intensive use areas; describe the need and expected use and method of operating and maintaining the facility.
- For Motorized Stewardship describe project **and source of matching funds**, narrative must include the source of the matching funds.
- Minimum Useful Life Agreement is required to be submitted with the signed grant agreement.

Repair and move an existing bridge involving repair decking and new abutments. The proposed work will involve skidsteer, dump trucks, loader, backhoe, and trailers. Replace/Repair trail culverts.

The proposed work is required due to being denied access to land where the existing trail use to be located. The club was able to secure easements for the current trail location but the trail is not passable without the proposed work. The existing bridge is 12ft x 50ft and was paid for under the snowmobile program in 2005. The bridge is currently in storage after a flood event in 2010 removed the bridge from its foundation. The club was able to re-locate the segment of trail where the bridge was located.

Estimated Cost

Maintenance	Acquisition	Insurance	Development	Bridge Rehab.	Trail Rehab.	Total Estimated Cost
				27,491.3		27,491.3
Leave Blank - DNR Use Only						
						27,491.00

4-30-15
a2

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Applicant Certification

As the applicant's authorized official, I certify that, to the best of my knowledge, the information in this application is true and correct.

Typed Name of Authorized Official Sean O'Donnell	Official's Title Parks and Programs Manager
Signature of Authorized Official 	Date Prepared 3/20/2015

Attachments - All projects require: Governmental unit resolution authorizing participation (sample below)

Maintenance: (Use with Snowmobile & ATV) <input type="checkbox"/> County map showing trail location	Trail Rehabilitation: (Use with Snowmobile & ATV) <input checked="" type="checkbox"/> County plat map showing segment proposal for rehabilitation <input checked="" type="checkbox"/> Cost estimate worksheet, Form 8700-014
Acquisition: (Use with Snowmobile & ATV) <input type="checkbox"/> For fee acquisition, consult with regional community service specialist to make sure proper procedures are followed. <input type="checkbox"/> For leases or easements, certification of easements or leases held	Major Bridge Rehabilitation or New Bridge: (Use with Snowmobile & ATV) <input checked="" type="checkbox"/> County plat map showing trail system and location of bridge <input checked="" type="checkbox"/> Pages 3 and 4 of application <input checked="" type="checkbox"/> Construction plans for new bridge or bridge repair
Insurance: (Use with ATV only) <input type="checkbox"/> Estimate of annual insurance premium	Intensive Use Area: (Use with ATV only) <input type="checkbox"/> County and plat maps showing project boundaries <input type="checkbox"/> Site plans showing any existing facilities along with proposed new construction including bridges, culverts, shelters, riding courses, parking lots, toilets and trails <input type="checkbox"/> Topographic map with major project elements noted <input type="checkbox"/> Preliminary construction plans for buildings, bridges, major grading, etc. <input type="checkbox"/> Cost estimate worksheet Form 8700-014
New Maintenance or Development: (Use with Snowmobile & ATV) <input type="checkbox"/> County plat and topographic map showing trail location and classification (existing and proposed new trail); bridges, culverts, railroad crossings, shelters, toilets, parking lots, and new trail construction for the new development segment. <input type="checkbox"/> Lease / easement certification (to be supplied prior to trail opening) <input type="checkbox"/> Cost estimate worksheet Form 8700-014 (development only) or pages 3 and 4 of application for new bridge <input type="checkbox"/> Construction plans for bridges or other structures	
Motorized Stewardship: Requires the attachments as identified in each specific category. See http://dnr.wi.gov/Aid/MotorStew.html for eligibility.	

Sample Resolution Authorizing Participation

Whereas _____ (Applicant) is interested in maintaining, acquiring, insuring, or developing lands for public outdoor motorized trail use; and
 Whereas said public motorized trails are eligible for snowmobile, all-terrain vehicle and/or motorized stewardship grant funds.

Therefore, be it resolved, that _____ (Applicant)
 hereby authorizes _____ (Name), _____ (Title),
 of _____ (Committee or Department),
 to act on behalf of _____ (Applicant) to:

Submit an application to the State of Wisconsin Department of Natural Resources for any financial aid that may be available; sign documents; and take necessary action to undertake, direct and complete the approved project.

Adopted this _____ day of _____, 20____,

I hereby certify that the foregoing resolution was duly adopted by _____ at a legal meeting held on the

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Form 8700-159 (R 12/08)

Built On Site Structure (Contractor or Sponsor)

Bridge Dimensions: 12' x 50'

Design Weight Load: 12000 lbs.

1. Engineering	\$	1,000.00
2. Soil Testing	\$	0.00
3. Site Preparation	\$	1,000.00
4. Structure Materials	\$	0.00
5. Abutments	\$	3,900.00
6. Pilings/Piers	\$	0.00
7. Approaches	\$	15,000.00
8. Riprap	\$	2,000.00
9. Labor	\$	
10. Equipment Rental	\$	
11. Other:	\$	
Total Cost	\$	22,900.00

Required Attachments

☒ Color Photograph of Site

☒ Location Map Showing Site and Waterbody Name

☒ Detailed Construction Plans (Show length, width, rail height, and types of materials to be used.)

Note: Costs for design weight loads in excess of 12,000 pounds are not eligible.

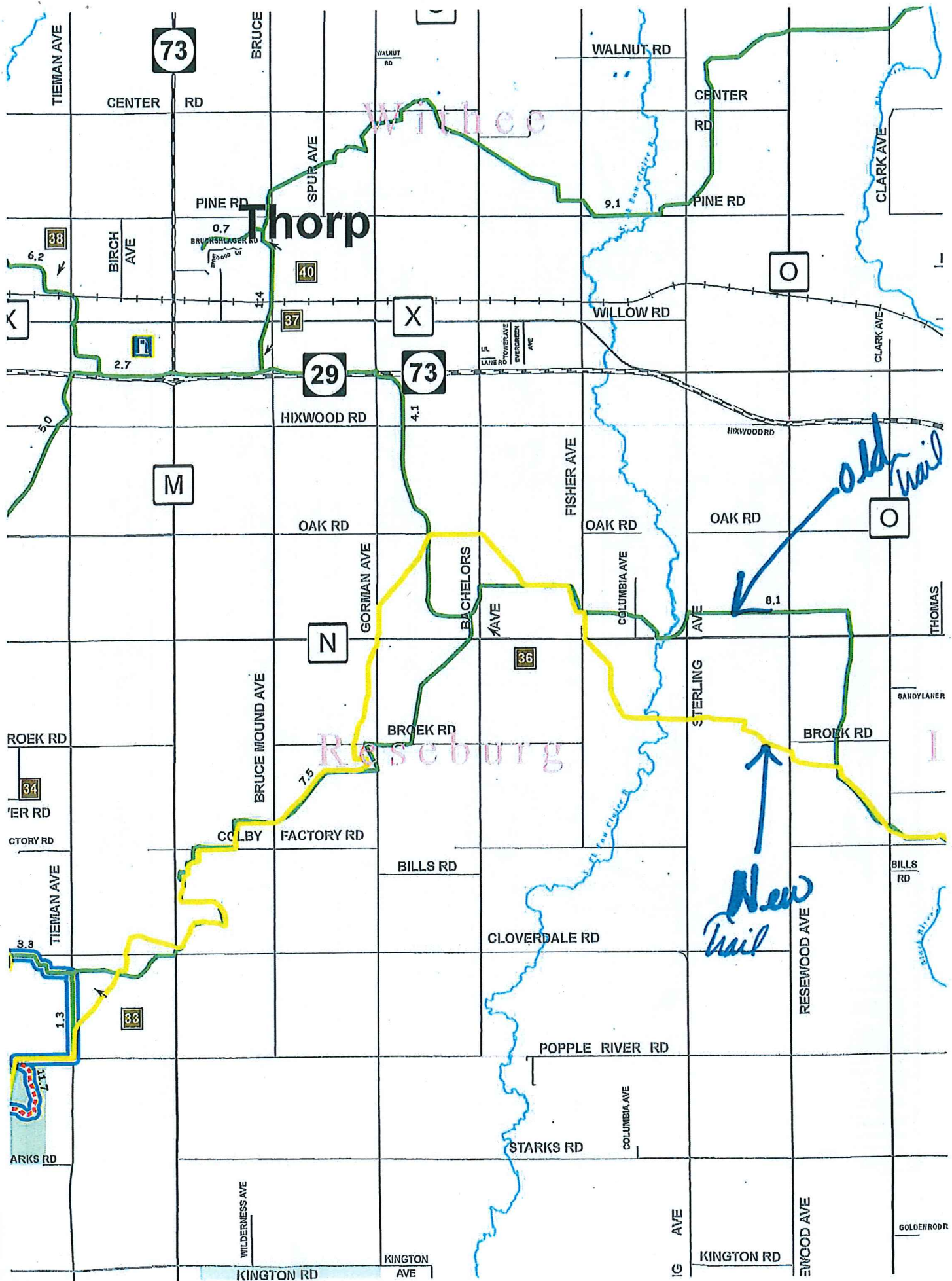
Summarize Costs in Appropriate Categories:

Prefab Structure

Bridge Dimensions:	Quote 1	Quote 2
	<input type="checkbox"/> Steel <input type="checkbox"/> Wooden	<input type="checkbox"/> Steel <input type="checkbox"/> Wooden
Bridge Manufacturer:		
Design Weight Load:	lbs.	lbs.
Cost of Structure: 1. Engineering	\$	\$
2. Structure	\$	\$
Subtotal	\$ 0.00	\$ 0.00
Installation Costs:	Quote 1	Quote 2
	<input type="checkbox"/> Contractor or <input type="checkbox"/> Sponsor Estimate	<input type="checkbox"/> Contractor or <input type="checkbox"/> Sponsor Estimate
1. Engineering	\$	\$
2. Soil Testing	\$	\$
3. Site Preparation	\$	\$
4. Abutments	\$	\$
5. Pilings/Piers	\$	\$
6. Approaches	\$	\$
7. Riprap	\$	\$
8. Labor	\$	\$
9. Equipment Rental	\$	\$
10. Other:	\$	\$
Subtotal	\$ 0.00	\$ 0.00
Total Cost	\$ 0.00	\$ 0.00

Community Services Specialist Comments and Approval:

Approved By _____ Date Site Viewed (if applicable) _____





Hazardous water crossing Clark County 2-28-13



Spring Melt



Trail
↓



Editing Budget

9-1-50

38224

Director of Admin.

Vendor Name: SBS STRUCTURES.

Address: 1053 MITSCHER AVENUE

HILLSBORO WI 54634

F50576

[illegible]

1099 CODES 7-Misc. 1099..

1-Rent-1099

Blank-Non-1099

Approved By

Committee: Audit Committee.

Department Head Mark E. Hill Date 8-25-05

Date _____

Existing Bridge

